



Division of Licensing & Certification

DDA/ResHab Certification - Statement of Deficiencies

Agency:	DH Western Inc dba Western Connections	Region(s):	5
Agency Type:	Res Hab	Survey Dates:	11/15/16
Certificate(s):	RH-5364	Certificate(s) Granted:	<input type="checkbox"/> 6 - Month Provisional <input checked="" type="checkbox"/> 1 - Year Full <input type="checkbox"/> 3 - Year Full

Rule Reference/Text	Findings	Agency's Plan of Correction (Please refer to the Statement of Deficiencies cover letter for guidance)	Date to be Corrected (mm/dd/yyyy)
16.04.17.302.04. 302.SERVICE PROVISION PROCEDURES. 04. Medication Standards. The agency must maintain a policy describing the program's system for handling participant medications which is in compliance with the IDAPA 23.01.01, "Rules of the Board of Nursing." (3-20-04)	<p>One of three participant record review lacked documentation the agency followed the agency medication policy.</p> <p>For example: Participant 3's MAR for 10/16 is missing documentation Metformin was given on 10/20/16</p>	<p>1. Western Connections will implement a new QA Process for medication documentation. Staff will be directed to initial the back of the medication bubble pack when assistance with medications has been provided. They will do this in addition to recording medication assisted with on the MARS. Before the staff member leaves their shift, the oncoming staff will check each medication to make sure that it has been assisted with and documented correctly. If the medication was assisted with, but the documentation is wrong, the original staff member will be given the opportunity to correct the error before</p>	12/15/2016



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		<i>leaving their shift. If there was an error in assisting with the medication, the QIDP will be called. The QIDP will keep record of any missed or wrong medications.</i> <i>2. At this time, Participant #3 is the only participant that requires assistance with medications. If Western Connections serves other clients that need assistance in the future, staff members will follow the same procedure.</i> <i>3. QIDP will be responsible for implementing corrective action.</i> <i>4. QIDP will review medication logs monthly to assure that Western Connections is in compliance with IDAPA rules.</i>	
16.04.17.400.02.n. 400.PARTICIPANT RECORDS. 02. Required Information. Records must include at least the following information: n. Daily record of the date, time, duration, and type of service provided.	Two of three participant record lack documentation the For example: Participant 1's record lacks documentation the staff initialed time in/time out and no documentation of services provided for some of the records.	<i>1. Western Connections will implement a new QA procedure for daily service logs. Staff will be instructed that they must document services provided for each shift. The oncoming staff member will check each daily service log to ensure</i>	<i>12/15/2016</i>



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	Participant 2's record lacks documentation the staff initialed time in/time out and no documentation of services provided for some of the records.	<i>that services have been documented for each shift. If there has been an error or an omission in documentation, the original staff member will be permitted to correct the error before leaving the shift. If they leave the shift without correcting the error or omission in documentation, the oncoming staff member will contact the QIDP. The QIDP will meet with the original staff member to assure that all documentation is correct in the future. 2. This procedure will be administered for all participants. 3. QIDP will be responsible for implementation. 4. QIDP will monitor all daily service logs monthly to ensure that serviced provided have been documented</i>	
16.04.17.400.02.o. 400.PARTICIPANT RECORDS. 02. Required Information. Records must include at least the following information: o. The plan of service including	Participant 1's Implementation Plan for drinking water the baseline is at 75% and the goal is set at 73%. This is the same for wear closing that is clean and in good repair. As written, the objective is not measurable	<i>1. QIPD will look at each participant's goals to ensure that each goal has an accurate baseline figure. QIDP will correct any necessary goals so that they</i>	<i>1/1/2016</i>



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<p>implementation plans maintained by the agency and data-based progress notes. (3-20-04)</p> <p>16.04.17.010.22 Implementation Plan. Written documentation of participants' needs, desires, goals and measurable objectives, including documentation of planning, ongoing evaluation, data-based progress and participant satisfaction of the program developed, implemented, and provided by the agency specific to the plan of service.</p> <p>16.04.17.011.01 Measurable Objective. A statement which specifically describes the skill to be acquired or service/support to be provided, includes quantifiable criteria for determining progress towards and attainment of the service, support or skill, and identifies a projected date of attainment.</p>	<p>and unable to make progress. Participant 2's implementation plan for has the tendency of telling others what to do, is not measurable.</p> <p>Participant 3's Implementation Plan for wearing clean & in good repair states for baseline she has a "tendency" to wear clothing that is worn out... but does not address frequency, not measurable. This is the same for not telling others what to do.</p>	<p><i>show frequency, are measurable, and are able to show progress.</i></p> <p><i>2. Corrective action will be taken for all 3 of Western Connections participants.</i></p> <p><i>3. QIDP will be responsible for corrective actions.</i></p> <p><i>4. QIDP will be aware of criteria of baseline, frequency, measurability, and ability to show progress and will make sure these are addressed in every goal.</i></p>	



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Agency Representative & Title: Hilary Western, QIDP <small>* By entering my name and title, I agree to implement this plan of correction as stated above.</small>	Date Submitted: 12/6/2016
Department Representative & Title: Pam Loveland-Schmidt, Licensing & Certification <small>* By entering my name and title, I approve of this plan of correction as it is written on the date identified.</small>	Date Approved: 12/7/2016